

Cumann Lúthchleas Gael an Dúin SANCTION APPLICATION FORM 2024

SECTION 1: PERSONAL DETAILS:	
NAME:	
ADDRESS:	
POSTCODE:	
DATE OF BIRTH:	
HOME CLUB:	
GAA MEMBERSHIP NUMBER:	
EMAIL:	
MOBILE/TELEPHONE:	
SECTION 2: CLUB YOU WISH TO PLAY FOR:	
NAME OF CLUB YOU WANT TO PLAY FOR:	
WHICH CODE/SPORT: (Please tick as appropriate)	HURLING
	FOOTBALL
AGE GROUP(S)	
1	wish to play FOOTBALL HURLING
for	Club and to be registered with CCC on such a basis, while still
remaining as a Player and a member of my home Club	
SIGNED BY THE PLAYER:	
DATE:	
SIGNED BY THE SECRETARY OF THE HOME CLUB:	
DATE:	

Completed form should be forwarded to Down GAA County Secretary Seán Óg McAteer via email: <u>secretary.down@gaa.ie</u> **or** post completed form to Down GAA County Office, 46-48 Main Street, Castlewellan, Co. Down BT31 9DP